

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: METHOD AND ARRANGEMENT FOR
OFFERING A SERVICE VIA
INFORMATION NETWORK
Attorney Docket Number:: 3502-1002
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 5
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FINLAND
Status:: Full Capacity
Given Name:: BORIS
Middle Name::
Family Name:: GEFWERT
City of Residence:: ESPOO
State or Province of
Residence::
Country of Residence:: FINLAND
Street of Mailing VARTIOTIE 4 A
Address::
City of Mailing Address:: ESPOO
State or Province of Mailing Address::
Country of Mailing Address:: FINLAND
Postal or Zip Code of Mailing Address:: FIN-02360

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FINLAND
Status:: Full Capacity
Given Name:: JUHA-TAPIO
Middle Name::
Family Name:: PESONEN
City of Residence:: ESPOO
State or Province of
Residence::
Country of Residence:: FINLAND
Street of Mailing MERIVIRTA 17 C 25
Address::
City of Mailing Address:: ESPOO
State or Province of Mailing Address::
Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FIN-02320

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FINLAND	20010168	1/29/01	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::